## DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my

| plural names are listed below) of the sul                                                                                                                                                                                                                                       | bject matter which                                       | n is claimed and for which a                                                                                                       | patent is sought                                                                                             | on the invention                   | Joint inventor (<br>entitled:    |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------|--|
| the application of which is attached hereto                                                                                                                                                                                                                                     | OR                                                       | U was filed as                                                                                                                     |                                                                                                              |                                    |                                  |  |
|                                                                                                                                                                                                                                                                                 | OK .                                                     | Number of PCT Interna                                                                                                              | iled onas United Sor PCT International Application Number<br>lation No), and was amended<br>(if applicable). |                                    |                                  |  |
| I hereby state that I have reviewed and by any amendment specifically referred                                                                                                                                                                                                  | understand the co                                        | ontents of the above identific                                                                                                     | ed application, in                                                                                           | ncluding the clai                  | ims, as amended                  |  |
| I acknowledge the duty to disclose is<br>continuation-in-part application(s), mate<br>the national or PCT international filing of                                                                                                                                               | nai information i                                        | which became available ber                                                                                                         | ty as defined i                                                                                              | n 37 CFR 1.56<br>date of the prior | 5, including for application and |  |
| I hereby claim foreign priority benefits to or plant breeder's rights certificate(s), of than the United States of America, listed patent, inventor's or plant breeder's right application on which priority is claimed.                                                        | d below and have<br>ts certificate(s), or                | c also identified below by                                                                                                         | (s) which desig                                                                                              | nated at least or                  | ne country other                 |  |
| Prior Foreign Application Number(s)                                                                                                                                                                                                                                             | Countr                                                   | ry Foreign Fi                                                                                                                      | Foreign Filing Date                                                                                          |                                    | Priority Claimed<br>Yes No       |  |
| 2003-111715                                                                                                                                                                                                                                                                     | JAPAN                                                    | April 1                                                                                                                            | _                                                                                                            | Ø                                  |                                  |  |
| I hereby claim domestic priority benefits<br>States provisional application(s), or §360<br>insofar as the subject matter of each of<br>International application in the manner p<br>to disclose any information material to the<br>filing date of the prior application and the | of the claims of rovided by the fir the patentability of | International application(s) of<br>this application is not disc<br>est paragraph of Title 35, Un<br>If this application as defined | lesignating the I<br>losed in a liste<br>ited States Code<br>in 37 C.F.R. 1                                  | United States, list disprised      | sted below and,<br>States or PCT |  |
| Prior U.S. or International Application Nu                                                                                                                                                                                                                                      | mber(s)                                                  | U.S. or International Filing Date                                                                                                  |                                                                                                              | Status                             |                                  |  |
| I hereby appoint all attorneys of SUGHI                                                                                                                                                                                                                                         |                                                          |                                                                                                                                    |                                                                                                              |                                    |                                  |  |

my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.



PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| NAME OF SOLE OR FIRST INVENTOR:                                                                 |                               |                        |                    |                         |  |  |  |  |
|-------------------------------------------------------------------------------------------------|-------------------------------|------------------------|--------------------|-------------------------|--|--|--|--|
| Given Name  (first and middle [if any])  Hideo                                                  | Family Name or Surname KITAMI |                        |                    |                         |  |  |  |  |
| nventor's Signature Hideir Kitami (是).                                                          |                               |                        |                    | April 2, 2004           |  |  |  |  |
| Kanagawa<br>Residence: City                                                                     | State                         | Japan<br>Country       |                    | Japanese<br>Citizenship |  |  |  |  |
| c/o NEC Infrontia Corporation, 2-6-1, Kitamikata,<br>Mailing Address: Takatsu-ku, Kawasaki-shi, |                               |                        |                    |                         |  |  |  |  |
| City Kanagawa                                                                                   | State                         | Zip                    |                    | Country Japan           |  |  |  |  |
| NAME OF SECOND INVENTOR:                                                                        |                               |                        |                    |                         |  |  |  |  |
| Given Name  Yoshikazu  (first and middle [if any])  KOBAYASHI  Family Name or Surname           |                               |                        |                    |                         |  |  |  |  |
| Inventor's Signature Joshif                                                                     | lay Kobayash                  | Date A                 |                    | April 2, 2004           |  |  |  |  |
| Residence: City                                                                                 | State                         | Japan<br>Country       | ountry Citizenship |                         |  |  |  |  |
| c/o NEC Infrontia Corporation, 2-6-1, Kitamikata, Mailing Address: Takatsu-ku, Kawasaki-shi,    |                               |                        |                    |                         |  |  |  |  |
| City Kanagawa                                                                                   | State                         | Zip                    |                    | Country Japan           |  |  |  |  |
| NAME OF THIRD INVENTOR:                                                                         |                               |                        |                    | :                       |  |  |  |  |
| Given Name                                                                                      |                               |                        |                    |                         |  |  |  |  |
| (first and middle [if any])                                                                     |                               | Family Name or Surname |                    |                         |  |  |  |  |
| Inventor's Signature                                                                            | Date                          |                        |                    |                         |  |  |  |  |
| Residence: City                                                                                 | State                         | Country                |                    | Citizenship             |  |  |  |  |
| Mailing Address:                                                                                |                               |                        |                    |                         |  |  |  |  |
| City                                                                                            | State                         | Zip Country            |                    | Country                 |  |  |  |  |
| NAME OF FOURTH INVENTOR:                                                                        |                               |                        |                    |                         |  |  |  |  |
| Given Name                                                                                      |                               |                        |                    |                         |  |  |  |  |
| (first and middle [if any])                                                                     | Family Name or Surname        |                        |                    |                         |  |  |  |  |
| Inventor's Signature                                                                            | Date                          |                        |                    |                         |  |  |  |  |
| Residence: City                                                                                 | State                         | Country                | Citizenship        |                         |  |  |  |  |
| Mailing Address:                                                                                |                               |                        |                    |                         |  |  |  |  |
| City                                                                                            | State                         | Zip                    |                    | Country                 |  |  |  |  |
| NAME OF FIFTH INVENTOR:                                                                         |                               |                        |                    |                         |  |  |  |  |
| Given Name                                                                                      |                               |                        |                    |                         |  |  |  |  |
| - (first and middle [if any]) - Family Name or Surname                                          |                               |                        |                    |                         |  |  |  |  |
| Inventor's Signature                                                                            |                               | Date                   |                    |                         |  |  |  |  |
| Residence: City                                                                                 | State                         | Country Citizenship    |                    | Citizenship             |  |  |  |  |
| Mailing Address:                                                                                |                               |                        |                    |                         |  |  |  |  |
|                                                                                                 | 0                             | 7.                     |                    |                         |  |  |  |  |
| City                                                                                            | State                         | Zip                    |                    | Country                 |  |  |  |  |